

It is the responsibility of counsel/litigants to ensure that all parties/witnesses are prepared to go forward in their case **AND** have the ability to connect or appear in the manner requested. Your signature below certifies that all parties/witnesses have been contacted and are available to appear on the hearing date requested. This form does not eliminate any notice requirements that must be filed with the Court.

Case Name(s): _____

Commonwealth/Petitioner/Plaintiff

(Please complete all contact info on Page 2)

Defendant/Respondent

(Please complete all contact info on Page 2)

Hearing Date Information

Parties appearing remotely via WebEx: ALL _____

Please complete page 2 (Contact Information for ALL Remote Participants)

Parties appearing in the courtroom: CWA/Plaintiff Defense Attorney Defendant Witness(es)

Hearing Type: Bond Plea Revocation Sentencing Trial Other _____

Case Currently set for _____ (Must include if advancing case)

Requested Hearing Date _____

*Requested Hearing Time Block (Check only one)

9am-12pm

2pm-4pm

No preference

Location of in custody Defendant _____ On Bond

Assigned Judge's name (if applicable) _____

Estimated Hearing Time Requested: 30 minutes 45 minutes Hours _____

*Upon receipt of this form, which must be emailed to ccjudgeschambers@cityofchesapeake.net, chambers staff will try to accommodate your requested hearing time block; however, hearing times are dependent on availability. Email confirmation of the assigned hearing time will be sent to all counsel. If you cannot adjust your schedule to appear at the assigned hearing time or if the hearing is no longer able to go forward, counsel must inform the Court by email (ccjudgeschambers@cityofchesapeake.net) as soon as possible.

Any written briefs, agreed stipulations, depositions, or exhibits must be exchanged, filed, and a copy e-mailed to ccjudgeschambers@cityofchesapeake.net, at least two days before the hearing date.

Interpreter Needed: No Yes (Language needed/for who?) _____

Attorney Endorsements (Print Name Under Signature):

Commonwealth/Petitioner/Plaintiff's Attorney

Counsel for the Defendant/Respondent

Court Use Only Granted (Assigned hearing time: _____)

Denied

Other _____

Judge _____ Entered _____

Contact Information for ALL Remote Participants

Connect to WebEx (www.webex.com) at least 10 minutes before the hearing, click join and enter the meeting number and password provided in the meeting invitation (sent via email by our office prior to the hearing).

<input type="checkbox"/> Witness <input type="checkbox"/> Other _____ Name _____ Phone _____ Email _____	<input type="checkbox"/> Witness <input type="checkbox"/> Other _____ Name _____ Phone _____ Email _____
<input type="checkbox"/> Witness <input type="checkbox"/> Other _____ Name _____ Phone _____ Email _____	<input type="checkbox"/> Witness <input type="checkbox"/> Other _____ Name _____ Phone _____ Email _____
<input type="checkbox"/> Witness <input type="checkbox"/> Other _____ Name _____ Phone _____ Email _____	<input type="checkbox"/> Witness <input type="checkbox"/> Other _____ Name _____ Phone _____ Email _____
<input type="checkbox"/> Witness <input type="checkbox"/> Other _____ Name _____ Phone _____ Email _____	<input type="checkbox"/> Witness <input type="checkbox"/> Other _____ Name _____ Phone _____ Email _____

Attention Clerk's office:

CONFIDENTIAL INFORMATION – PLACE IN SEALED ENVELOPE